

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Cupp, C., et al.
Appl. No.: 09/936,672
Conf. No.: 9108
Filed: January 23, 2002
Title: DENTAL DIET FOR REDUCING TARTAR
Art Unit: 1761
Examiner: Keith D. Hendricks
Docket No.: 115808-320

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the final Office Action dated December 28, 2004, please amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 6 of this paper.

AF-1 1761
FFD

OFFICE
FEB 28 2005
PATENT
MARK
UNITED STATES

AMENDMENT TRANSMITTAL LETTER (Large Entity)		Docket No. 115808-320
Applicant(s): Cupp, C., et al.		

Application No. 09/936,672	Filing Date January 23, 2002	Examiner Keith D. Hendricks	Customer No. 29157	Group Art Unit 1761	Confirmation No. 9108
-------------------------------	---------------------------------	--------------------------------	-----------------------	------------------------	--------------------------

Invention: **DENTAL DIET FOR REDUCING TARTAR**

COMMISSIONER FOR PATENTS:


Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE		ADDITIONAL FEE
TOTAL CLAIMS	32 -	33 =	0	x	\$50.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0	x	\$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 02-1818
 - ☒ Any additional filing fees required under 37 C.F.R. 1.16.
 - ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038.


WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



Signature

Dated: February 25, 2005

Robert M. Barrett (Reg. No. 30,142)
Bell, Boyd & Lloyd LLC
P.O. Box 1135
Chicago, Illinois 60690-1135
Tel: 312/807-4204
Fax: 312/827-8185

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on 02/25/05 (Date)  Signature of Person Mailing Correspondence Renee Street Typed or Printed Name of Person Mailing Correspondence
--

cc: